

**Supplemental Application Data Sheet**

**Application Information**

Application number::	<u>10/567,869</u>
Filing Date::	<u>08/06/04</u>
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	METHOD TO DETERMINE 3-D ELEMENTAL COMPOSITION AND STRUCTURE OF BIOLOGICAL AND ORGANIC MATERIALS VIA ATOM PROBE MICROSCOPY
Attorney Docket Number::	392458110US1
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Steven
Middle Name::	L.
Family Name::	Goodman
City of Residence::	Madison

State or Province of Residence:: WI  
Country of Residence:: US  
Street of mailing address:: 13 Mark Twain Street  
City of mailing address:: Madison  
State or Province of mailing address:: WI  
Postal or Zip Code of mailing address:: 53705

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Thomas  
Middle Name:: F.  
Family Name:: Kelly  
City of Residence:: Madison  
State or Province of Residence:: WI  
Country of Residence:: US  
Street of mailing address:: 2021 Chamberlain Avenue  
City of mailing address:: Madison  
State or Province of mailing address:: WI  
Postal or Zip Code of mailing address:: 53726

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: John  
Middle Name:: J.  
Family Name:: Kremer  
City of Residence:: Gary Albertville  
State or Province of Residence:: NC MN  
Country of Residence:: US

Street of mailing address:: ~~5630 Cary Glen Blvd.~~ 6732 Lakeview Circle  
City of mailing address:: Cary Albertville  
State or Province of mailing address:: ~~NC~~ MN  
Postal or Zip Code of mailing address:: ~~27519~~ 55301

**Correspondence Information**

Correspondence Customer Number:: 25096

**Representative Information**

Representative Customer Number:: 25096

**Domestic Priority Information**

**Foreign Priority Information**

**Assignee Information**

Assignee name:: Imago Scientific Instruments Corporation  
Street of mailing address:: ~~Suite 100~~ 5500 Nobel Drive  
~~6300 Enterprise Lane~~  
City of mailing address:: Madison  
State or Province of mailing address:: WI  
Postal or Zip Code of mailing address:: ~~53719~~ 53711